Centre Church United Church of Christ Lynnfield, Massachusetts Family Registration Form 2017

| Please list your children youngest to oldest: Child's Name: | Date of Birth: | Grade: |
|--|---------------------------------|---|
| Child's Name: | | |
| Child's Name: | | |
| Name of Parent(s)/Guardian(s): | | |
| Home Address: | | |
| Primary Phone: | Secondary Phone: | |
| E-mail address: | | |
| If you have any additional/secondary contact in comes to church with them regularly, please sho | | embers, particularly if your child |
| Name of Guardian/Relative/Friend: | Phone I | Number: |
| It is our goal to make Centre Church Sunday Sch | hool a wonderful experience | for your child: |
| If your child has <i>allergies, health concerns or sp</i> questionnaire If you'd like a phone call from L Note: If your child is in middle or high school, w | arainne prior to the start of S | Sunday School, check here |
| Parents are always welcome to volunteer! We opportunities (events volunteer, materials volu interested in volunteer opportunities, check he | inteer, Sunday School volunte | |
| <u>Photo Permission:</u> In order to share the good n photos of children and you for use on bulletin b on our website. When publishing online, we D | ooards, in our newsletter, on | social media (mainly Facebook) or |
| Circle one: I DO / DO NOT consent to having p Church related activities. | hotos and/or videos taken of | [•] my child during Sunday School or |
| You have my permission to use the photos in th | ne following ways (check all t | hat apply): |

____ In the church classroom _____ On church bulletin boards _____ In Tower Notes (Church newsletter) _____ On church website ___ Facebook/Social Media Other Church Publications

or

- □ dropped off at the registration table on Welcome Back Sunday (September 10, 2017)
- e-mailed to Larainne Wilson -- LWilson@centre-church.org Questions? Please contact Larainne Wilson LWilson@centre-church.org OR 339-226-0544 (cell phone)